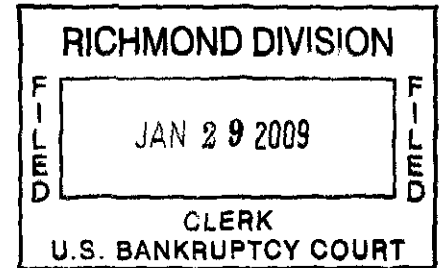




FLORENCE COUNTY
Treasurer's Office / Delinquent Tax Division

January 26, 2009

United States Bankruptcy Court
Eastern District of Virginia
310 United States Courthouse Annex
1100 East Main St.
Richmond, VA 23219-3535



RE: Objection to Transfer of Claim for Circuit City Stores, Inc.
Case No.: 08-35653

To Whom It May Concern:

On 1/26/09, our office received an offer from the United States Debt Recovery LLC ("USDR") company for a settlement of \$2518.56 in lieu of the \$7195.89 debt owed by Circuit City to the Florence County Treasurer for taxes.

This letter is to notify the court that we are not accepting this offer from United States Debt Recovery LLC.

Thank you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Glenda Montrose".

Glenda Montrose
STS

cc: United States Debt Recovery LLC
940 Southwood Bl., Suite 101
Incline Village, NV 89451

**UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA**

)	Chapter 11
In re:)	
)	Case No.: 08-35653
CIRCUIT CITY STORES, INC.,)	
)	Judge Kevin R. Hennekens
Debtor.)	
)	
)	
)	

NOTICE OF TRANSFER OF CLAIM PURSUANT TO B.R.B.P RULE 3001(e)(1)

Name of Proposed Transferor:
Cushman & Wakefield of Illinois Inc
455 N Cityfront Plz Dr.
Ste 2800
Chicago IL 60611-5555

Name of Transferee:
United States Debt Recovery LLC
940 Southwood Bl, Suite 101
Incline Village NV 89451

No action is required if you do not object to the transfer of your claim. However, IF YOU OBJECT TO THE TRANSFER OF
YOUR CLAIM, YOU MUST OBJECT WITHIN 20 DAYS OF THE DATE OF THIS NOTICE BY:

FILE A WRITTEN OBJECTION TO THE TRANSFER with:

United States Bankruptcy Court
Eastern District of Virginia
310 United States Courthouse Annex
1100 East Main St.
Richmond, VA 23219-3538

SEND A COPY OF YOUR OBJECTION TO THE PROPOSED TRANSFEREE:

If your objection is not timely filed, the transferee will be substituted on the Court records as the claimant.

FOR CLERK'S OFFICE ONLY:

This notice was filed to the first party, by first class mail, postage prepaid on

INTERNAL CONTROL NO. _____
Copy (check) Claims Agent _____ Transferee _____ Debtor's
Attorney _____

Deputy Clerk